Attorney Docket No.

BIRCH, STEWART, KOLASCH & BIRCH, LLP 0020-4927P

EASE NOTE:
)U MUST
)MPLETE THE
)LLOWING

P.O. Box 747 ·· Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 · Facsimile: (703) 205-8050

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

sert Title:	SEMICO	NDUCTOR C	CAPACITOR DE	VICE			
ll in Appropriate formation -		s filed on					as
r Use Without	United States Appli	cation Number			<i></i>	!:	
ecification tached:	and amended on	a filod on			(п	applicable)	anwor as PCT
tacned:	International Applie	s med on	as PCT and was				
	amended under PC	F Article 19 on _				(if appl	icable)
	I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56. I do not know and do not believe the same was ever known or used in the United States of America before my or our invention thereof, or patented or described in any printed publication in any country before my or our invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representative or assigns more than twelve months (six months for designs) prior to this application, and that no application for patent or inventor's certificate on this invention has been filed in any country foreign to the United States of America prior to this application by me or my legal representatives or assigns, except as follows. I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:						
		,	at of the application of	a which priority is the		Priority C	laimed
sert Priority	Prior Foreign Applica	ttion(s)					
formation:	<u>2000-345060</u>	Japar		11/13/200		\boxtimes	
f appropriate)	(Number)	(Country)		(Month/Day/Year)	Filed)	Yes	No
	(Number)	(Country)		(Month/Day/Year)	Filed)	Yes	No
	(Number)	(Country)		(Month/Day/Year	Filed)	Yes	No
	(2.42002)	(33223)			•	-	
	(Number)	(Country)		(Month/Day/Year	Filed)	Ц Yes	N _o
	I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional applications(s) listed below.						
nsert Provisional Application(s): if any)	(Application Number)			(Filing Date)			
*	(Application Number)	- 11		(Filing Date)			
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:						
	Country		Application Number	Date	e of Filing (Month/I	ay/Year)	
Insert Requested Information: (if appropriate)							
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.						
Insert Prior U.S. Application(s): (if any)	(Application Number)	,	(Filing Date)	(St	atus - patented, pen	ding, aband	loned)
	(Application Number)		(Filing Date)	(St	atus - patented, per	ding, aband	doned)
Page 1 of 2	(Application Number)		(r.mmê nave)	(5)	Tire hannad bea	6, -3-2-	•

Attorney Docket No.

I hereby appoint the following attorneys to prosecute this application and/or an international application based on this application and to transact all business in the Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the attorneys identified below, unless the inventor(s) or assignee provides said attorneys with a written notice to the contrary:

Raymond C. Stewart	(Reg. No. 21,066)	Terrell C. Birch	(Reg. No. 19,382)
Joseph A. Kolasch	(Reg. No. 22,463)	James M. Slattery	(Reg. No. 28,380)
Bernard L. Sweeney	(Reg. No. 24,448)	Michael K. Mutter	(Reg. No. 29,680)
Charles Gorenstein	(Reg. No. 29,271)	Gerald M. Murphy, Jr.	(Reg. No. 28,977)
Leonard R. Svensson	(Reg. No. 30,330)	Terry L. Clark	(Reg. No. 32,644)
Andrew D. Meikle	(Reg. No. 32,868)	Marc S. Weiner	(Reg. No. 32,181)
Joe McKinney Muncy	(Reg. No. 32,334)	Donald J. Daley	(Reg. No. 34,313)
John W. Bailey	(Reg. No. 32,881)	John A. Castellano	(Reg. No. 35,094)
Gary D. Yacura	(Reg. No. 35,416)	Thomas S. Auchterlonie	(Reg. No. 37,275
Mark J. Nuell	(Reg. No. 36,623)		

Send Correspondence to:

BIRCH, STEWART, KOLASCH & BIRCH, LLP

or

Customer No. 2292

P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 · Facsimile: (703) 205-8050

LEASE OTE: **OU MUST**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
Hidenori MORIMOTO	Hideron Morimoto		10/26/2001
Residence (City, State & Country)		CITIZENSHI	P
Tenri-shi, Nara-ken, Jap	pan	Japan	
MAILING ADDRESS (Complete Street Addres	ss including City, State & Country)	_
2613-1-455, Ichinomoto-	cho, Tenri-shi, Na	ra-ken,	Japan
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
Residence (City, State & Country)		CITIZENSH	IP
MAILING ADDRESS (Complete Street Addre	ss including City, State & Country	<i>'</i>)	
GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE		DATE*
	INVENTOR'S SIGNATURE	CITIZENICE	
GIVEN NAME/FAMILY NAME Residence (City, State & Country)	INVENTOR'S SIGNATURE	CITIZENSH	
Residence (City, State & Country)			
Residence (City, State & Country) MAILING ADDRESS (Complete Street Address)	ess including City, State & Countr		IIP
Residence (City, State & Country)			
Residence (City, State & Country) MAILING ADDRESS (Complete Street Address GIVEN NAME/FAMILY NAME	ess including City, State & Countr	y)	DATE*
Residence (City, State & Country) MAILING ADDRESS (Complete Street Address)	ess including City, State & Countr		DATE*
Residence (City, State & Country) MAILING ADDRESS (Complete Street Address GIVEN NAME/FAMILY NAME Residence (City, State & Country)	ess including City, State & Country INVENTOR'S SIGNATURE	citizense	DATE*
Residence (City, State & Country) MAILING ADDRESS (Complete Street Address GIVEN NAME/FAMILY NAME	ess including City, State & Country INVENTOR'S SIGNATURE	citizense	DATE*

OMPLETE \mathbf{HE} OLLOWING:

ill Name of First or Sole Inventor: sert Name of Inventor

usert Residence sert Citizenship

isert Post Office Address

ull Name of Second Inventor, if any:

Full Name of Third Inventor, if any,

sbove

Fert Date This

Inventor, if any: above

Full Name of Fourth

Page 2 of 2 (Rev. 01/22/01)